ANNUAL	OFIT DRATION REPORT		1	B. Mortha	m e				
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al Place of B	Business		Mailing Address			! !!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	<b>                                  </b>	FINIT FINIT NU	AN OIDII DIGII IOCI
1. Side Hwy. T. 2. Box 23 RCher FL 32	)		10310 S.W. ST. 45 RT. 2. BOX 23 ARCHER FL 32618 US			<ol> <li>Date Incorporated or Qualifie</li> <li>11/13/1968</li> </ol>		of Last Re 06/19/1	· .
icipal Piace c	of Business		2a. Mailing Address			4. FEI Number 59-1225611	<b>.</b>		Applied For Not Applicable
ite, Apt. #, etc	to.	2	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional Required
y & State			City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.0	0 May Be d to Fees
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9.	25 ), Name and Ad	dress of Current Re				10. Name and Address of New		Ageni	
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ARCHER	FL 32618					••••••••••••••••••••••••••••••••••••••			- Code
ursuant to the	e provisions of Se	the State of Florida. S	luch change was authoriz	zed by the	84 City	oration submits this statement for the ard of directors. I hereby accept the a	FL purpose of cha ppointment as		p Code registered office I agent. I am
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